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VIA FACSIMILE: 1-571-273-8300

Atty. Docket No. MIC35 P-334

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Art Unit : 1641
Examiner : Mary Ceperley
Applicants : Petar R. Dvornic et al.
Appln. No. : 10/712,739
Filing Date : November 13, 2003
Confirmation No. : 8890
For : SOLID-STATE COLORIMETRIC BIOSENSORS COMPRISED
OF DENDRITIC POLYMER NETWORKS

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450

Dear Sir:

CERTIFICATION OF FACSIMILE TRANSMISSION

I hereby certify that the following papers are being transmitted in response to the Office Action mailed February 2, 2006, by facsimile to the Patent and Trademark Office on the date shown below:

1. Claims As Amended Cover Sheet consisting of 2 pages
(in duplicate), and
2. Response consisting of ten (10) pages.

YOU SHOULD RECEIVE A TOTAL OF 15 PAGES (INCLUDING THIS PAGE).

April 27, 2006
Date

Deborah A. Clark
Deborah A. Clark
Price, Heneveld, Cooper,
DeWitt & Litton, LLP
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Post Office Box 2567
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(616) 949-9610

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Mail Stop Amendment
 Commissioner for Patents
 P.O. Box 1450
 Alexandria, Virginia 22313-1450

Dear Sir:

Transmitted herewith is a Response to the Office Action mailed February 2, 2006 for the above-identified application.

Any fee for additional claims has been calculated as shown below:

CLAIMS AS AMENDED

	Col. 1		Col. 2	Col. 3	Small Entity		Other Than A Small Entity	
	Claims Remaining After Amendment		Highest No. Previously Paid For	Present Extra	Rate	Add'l Fee	Rate	Add'l Fee
Total Claims	* 27	Minus	** 30	= 0	x \$25	\$ 0	X \$ 50	\$
Independent Claims	* 3	Minus	*** 3	= 0	x 100	\$ 0	X \$200	\$
First Presentation of Multiple Dependent Claims \$180						\$ 0	X \$360	\$
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT						\$ 0		\$

* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.

** If the "Highest No. Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.0.

*** If the "Highest No. Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.
 The "Highest No. Previously Paid For" (Total or Independent) is the highest number found from the equivalent box in Col. 1 of a prior amendment or the number of claims originally filed.

Applicants : Petar R. Dvornic et al.
 Appln. No. : 10/712,739
 Page : 2

Each Additional Group of 50 Pages That Exceeds 100 Pages

Col. 1		Col. 2	Col. 3	Small Entity		Other Than A Small Entity	
No. of Groups Remaining After Amendment		Highest No. of Groups Previously Paid For	Present Extra Groups	Rate (each add'l 50 pages over 100)	Add'l Fee	Rate (each add'l 50 pages over 100)	Add'l Fee
1	Minus	*2	=**0	x \$125	\$0	X \$250	\$

One "group" is a set of 50 application (specification, claims, abstract, and drawings) pages.


- * If the entry in Col. 2 is more than the entry of Col. 1, write "0" in Col. 3
 ** If the entry in Col. 3 is not "0," pay the required fee.

1. Small entity status of this application 37 CFR §§1.9 and 1.27 has been established by a verified statement previously submitted or is enclosed.
2. X No additional fee is required.
3. A fee of \$ to cover the cost of the additional claims added by this response is enclosed.
4. A fee of \$ to cover the application size fee is enclosed.
5. X Please charge any additional fees or credit overpayment to Deposit Account No. 16 2463. A duplicate copy of this sheet is attached.

Respectfully submitted,

April 27, 2006
 Date

GJE/dac


 Gunther J. Evanina, Registration No. 35 502
 Price, Heneveld, Cooper, DeWitt & Litton, LLP
 695 Kenmoor, S.E.
 Post Office Box 2567
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First Presentation of Multiple Dependent Claims \$180						\$ 0	X \$360	\$
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT						\$ 0		\$

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** If the "Highest No. Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.0.

*** If the "Highest No. Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.
 The "Highest No. Previously Paid For" (Total or Independent) is the highest number found from the equivalent box in Col. 1 of a prior amendment or the number of claims originally filed.

Applicants : Petar R. Dvornic et al.
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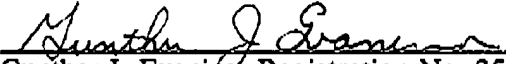
- * If the entry in Col. 2 is more than the entry of Col. 1, write "0" in Col. 3
 ** If the entry in Col. 3 is not "0," pay the required fee.

- Small entity status of this application 37 CFR §§1.9 and 1.27 has been established by a verified statement previously submitted or is enclosed.
- ☒ No additional fee is required.
- A fee of \$_____ to cover the cost of the additional claims added by this response is enclosed.
- A fee of \$_____ to cover the application size fee is enclosed.
- ☒ Please charge any additional fees or credit overpayment to Deposit Account No. 16 2463. A duplicate copy of this sheet is attached.

Respectfully submitted,

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Dear Sir:

AMENDMENT

In response to the Office Action mailed February 2, 2006, Applicants request reconsideration and examination in view of the following amendments and remarks.

Please amend the above-referenced application as follows.

Amendments to the claims are reflected in the listing of claims which begins on page 2 of this paper.

Remarks begin on page 6 of this paper.